

The Hope Chapter - 1 Clinicians ch 13.
(With apologies to the apostle Paul).

1 I may be able to speak the jargon of clinicians and the Funding and Planning Board, but if I have no hope my words are no more than a noisy gong or a clanging bell. 2 I may have a psychiatry degree, I may have many years learning and understand all secrets; I may have all the funding needed to provide a service – but if I have no hope, I have nothing. 3 I may take psychiatric drugs, and even let my brain be shocked – but if I have no hope, this does me no good.

4 Hope gives purpose and motivation. It is not coercive or paternal or condescending; 5 hope is not compliant or desperate or accepting of limits; hope does not keep a record of failings; 6 hope does not settle for illness but recognises wellness. 7 Hope never gives up; and its optimism for recovery and wellness never fails.

8 Hope is eternal. There are drugs but they will need adjustment, there is psychosis and speaking in strange tongues, but this will pass, there is talking therapy but the session will end. 9 For our progress through drugs and inspired talk is only partial; 10 but when hope comes the limits on our path to recovery will disappear.

11 When I was mad my speech, feelings and thinking were mad; now that I am well I cherish my experience and move on. 12 For what we see now is a dim image of the recovery model; in our vision we see full recovery on every face. What we know now under the medical model is only partial; when the recovery model is enabled our recovery will be complete, as complete as our self-knowledge allows.

13 Meanwhile these remain our goals, self-directed recovery and wellness; and the catalyst of these is hope.

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In case you don't recognise it, its a rip off from the Love chapter – 1 Corinthians ch 13.
(Good News version)